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## \*BIBDATASHEET\*

CONFIRMATION NO. 5684

Bib Data Sheet

<b>SERIAL NUMBER</b> 10/753,758	<b>FILING OR 371(c) DATE</b> 01/07/2004 <b>RULE</b>	<b>CLASS</b> 704	<b>GROUP ART UNIT</b> 2626	<b>ATTORNEY DOCKET NO.</b> 000291-010210US
<b>APPLICANTS</b> Mark Grossmeyer, Cedarburg, WI; Myron Hitchcock, Englewood, FL;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/439,265 01/10/2003 <i>JWZ</i>				
<b>** FOREIGN APPLICATIONS *****</b> <i>N/A JWZ</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE</b> <b>GRANTED ** 04/21/2004</b> <b>** SMALL ENTITY **</b>				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <i>Assurance</i> Verified and Acknowledged <i>Examiner's Signature</i> <i>Initials</i>		<b>STATE OR COUNTRY</b> WI	<b>SHEETS DRAWING</b> 3	<b>TOTAL CLAIMS</b> 5 <b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> 20350				
<b>TITLE</b> Voice-activated programmable remote control				
<b>FILING FEE RECEIVED</b> 450	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	